

SUMMARY OF 1995 CHAPTERED LEGISLATION
FAMILY CHILD CARE HOMES and
CHILD CARE CENTERS

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I. IMMEDIATE ACTION REQUIRED

AB 265 (O'Connell) Chapter 425 / Statutes of 1993

Affects Facility Category: Family Child Care Homes

SUBJECT: Family Child Care Home Capacity Project

Health and Safety Code Section 1597.41, (Chapter 425, Statutes of 1993) provided for continuation of the family child care home pilot project in Ventura and Placer counties and added Fresno, San Diego and San Luis Obispo counties to the project. Family child care homes in the above mentioned counties were eligible to accept two additional school-aged children for care.

The pilot ends on January 1, 1996 and has not been extended.

IMPLEMENTATION

No regulations are needed. The attached letter will be sent to all Family Child Care Home (FCCH) licensees in the project counties. At the next scheduled site visit, if the licensee is continuing to operate above the permitted capacity, (6 for a small family child care home and 12 for large family child care home) verify that no new children have been added since January 1, 1996. If children have been added since January 1, 1996 and the licensee has more than the permitted number of children, they are operating overcapacity and should be cited for violation of Section 102416.5. If no new children have been added since January 1, 1996 and the licensee's capacity still exceeds the permitted level, a plan of correction should be developed to ensure the licensee will not replace any children who leave the program until their capacity is below the legally established limit.

Do not continue to discuss the project at FCCH orientations nor accept any new project applications.

Licensees who are participating in the food program and the project should be advised to contact their local food program representative to determine what effect the project's ending will have on their reimbursement amount.

NOTE: There is a two year bill (SB 265), making its way through the Legislature that would, if passed, allow the capacity increase for school-age children statewide. However, there is no assurance that SB 265 will pass and unless it is enacted as urgency legislation, it would not be effective until January 1, 1997.

AB 301 (Alpert), Chapter 473 / Statutes of 1995

Affects Facility Category: Child Care Centers

SUBJECT: Child Care Centers: Immunizations

AB 301 adds Section 1596.794 to the Health and Safety Code. Under this law, "drop-in" child care centers are not required to verify or maintain files on children's immunizations or tuberculosis tests. Upon admission of the child, the parent must sign an acknowledgement that he or she understands that verification of immunizations and tuberculosis testing is not required for attendance at a drop-in center.

A drop-in center is defined as:

Any day care center that exclusively offers a program of services at which there is no contract or agreement between any parent and the center for the regular care of any child, and for which there is no prearranged schedule of care for any child.

This law does not exempt drop-in centers from any other licensure requirements. Moreover, this law will only be in effect until January 1, 2001, unless another law is enacted to extend that date.

IMPLEMENTATION

No regulations are needed. Use the statutory provisions in Section 1596.794 as the authority for implementation. An Evaluator Manual update will also be prepared. Check the facility files to make sure that the facility is obtaining the required acknowledgements signed by parents. There is no special form for the acknowledgements. Each center must develop their own forms.

SB 503 (Petriss), Chapter 512 / Statutes of 1995

Affects Facility Category: Child Care Centers

SUBJECT: Child Passenger Restraints: Public Notice

This law adds a new Section 1596.95(g) to the Health and Safety (H&S) Code and renumbers the old (g) and a succeeding section. It requires applicants for a child care center license to post signs at the entrance to the facility regarding child passenger restraint systems (child car seats). These signs must list the telephone number of the local health department and the following information:

- (1) Protect your child--it's the law.
- (2) Children under the age of four (regardless of weight), or weighing less than 40 pounds (regardless of age), must be in an approved child car seat.
- (3) You may be cited for a violation of the child car seat law (for up to \$270). If you are cited, your automobile insurance could go up.
- (4) Call your local health department for more information.

IMPLEMENTATION

No regulations are needed. Use the statutory provisions in Section 1596.95(g) as the authority for implementation. Check to see that the sign is posted at the entrance to the facility during the applicant's preclicensing visit. Provide existing licensees with a copy of the form at the next visit. If, at subsequent visits the form is not posted, cite the facility for violation of Section 1596.95.

Attached is a copy of the newly created PUB 269 (12/95), which contains the required information. Applicants and licensees must supply the phone number of the local health department. This form can be copied and used immediately as a sign in compliance with this law. Please distribute copies to applicants at orientations. You can also distribute copies at the time of a site visit. The PUB 269 will also be available in Spanish. To obtain a camera-ready copy of the English and/or Spanish versions of the PUB 269, please telephone or write:

CDSS Forms Management Unit
744 P Street, M.S. 7-182
Sacramento, CA 95814
(916) 657-1907/(CALNET) 437-1907
FAX (916) 653-7395/(CALNET) 8-453-7395

The PUB 269 is currently available only in camera-ready copy. Pre-printed signs will be available at a later date.

III. INFORMATION ONLY

AB 653 (Davis), Chapter 539 / Statutes of 1995

Affects Facility Category: Family Child Care Homes and Child Care Centers

SUBJECT: Child Death

This legislation has no direct effect on the licensing program. It amends Section 11166.9 of the Penal Code to add new organizations to the list of those that can provide information for an annual report on child death.

AB 653 also changes the responsibility for the preparing the report from the California Consortium on Child Abuse Prevention to the Department of Justice. The report will be distributed to local child death review teams, in addition to the Governor and the Legislature, as is currently done. The cost of preparing and distributing the report will be incurred by the Department of Justice.

IMPLEMENTATION

No implementation action is required. This is provided for information purposes only.

AB 731 (Davis), Chapter 776 / Statutes of 1995

Affects Facility Category: Family Child Care Homes and Child Care Centers

SUBJECT: Pilot Project/Care of Children with Special Health Needs

AB 731 is an urgency measure that became effective October 12, 1995. It adds Section 1597.15 to the Health and Safety Code. This law requires the director of the California Department of Social Services to authorize the University of California to conduct a 24-month pilot project known as the Access Project. The purpose of the pilot project is to test the feasibility of allowing licensed child care staff to administer medications through nebulizers and to do gastric tube feedings. The authority to conduct the pilot project will apply only if the Regents of the University of California approve.

The principal investigator for the project will be selected by the University of California. The principal investigator must be a licensed medical doctor (M.D.), experienced in supervising programs in which nonmedical personnel perform minor

health procedures. The principal investigator will select the licensed family child care providers and child care center staff who will participate in the project. Children who participate must have written permission from their personal physician. Other conditions and precautions will also apply.

The principal investigator of the Access Project must submit a project evaluation to the Legislature. In preparing this report, the principal investigator will consult with the California Departments of Health Services, Social Services, child care provider organizations, and child care resource and referral agencies. The principal investigator will also consult with the Department to determine if additional data, is necessary for the Department to make use of the report.

The evaluation will include a wide range of information; e.g., overall impressions of participants, adequacy of the training, impact on the health and safety of children in care, and the cost of providing the care. It will also include recommendations about whether the pilot project should be expanded statewide and whether other medical procedures should be included in future pilot projects.

IMPLEMENTATION

No implementation action is required. This pilot project has no direct impact on community care licensing activities. The University of California will notify the Department of any licensed family child care providers or child care center staff selected to be trained and the procedures to be performed. This notification will occur before the procedures are undertaken in the facility. If this pilot project is successful, it may ultimately lead to changes in the law that will enable providers to perform specified minor health procedures in licensed child care facilities.

DEPARTMENT OF SOCIAL SERVICES
744 P Street, Sacramento, CA 95814



December 20, 1995

TO: FAMILY CHILD CARE LICENSEES IN FRESNO, PLACER,
SAN DIEGO, SAN LUIS OBISPO AND VENTURA COUNTIES

SUBJECT: END OF PILOT PROJECT PERMITTING CARE TO TWO ADDITIONAL
SCHOOL-AGE CHILDREN

As of January 1, 1996, the pilot project to allow capacity increases of up to two additional school-age children in Family Child Care Homes will end. Legislation required to extend the project has not been passed by the Legislature.

Those of you who are operating with additional children above the permitted levels (6 for a small child care home and 12 for a large child care home) must reduce your capacity as soon as a vacancy occurs in your home. This can be done by not adding any new children until your capacity falls below the level permitted by your license. Your Licensing Program Analyst (LPA) will be verifying that no new children have been added since January 1, 1996 if your capacities are currently above the permitted level.

I realize that it can be difficult to inform a parent that you can no longer care for his or her child because of the capacity reduction. This is why your LPA will not expect you to stop providing care to any child immediately. However, you need to be aware that as parents remove their children for any reason, you will not be able to replace that child until your capacity falls below the level permitted prior to the pilot program. This means that even if you have an opening for an infant, as long as you have the additional school-age children, you will not be able to replace the infant until your capacity is below the permitted level.

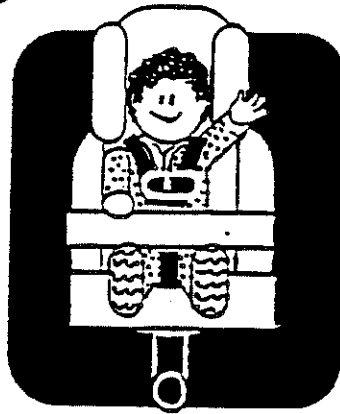
If you have any questions about this matter, please contact your LPA.

Sincerely,

A handwritten signature in black ink, reading "Martha Lopez", is written over the typed name.

MARTHA LOPEZ, Deputy Director
Community Care Licensing Division

CHILD CAR SEAT LAW



- Protect your child -- it's the law.
- Children under the age of four years (regardless of weight), or weighing less than 40 pounds (regardless of age), must be in an approved child car seat.
- You may be cited for a violation of the child car seat law (for up to \$270). If you are cited, your automobile insurance rates could go up.
- Call your local health department for more information. The number is: _____.

All applicants for a license for a child care center must post copies of this sign -- or a sign with the exact same information -- at the entrance to the facility. This is a condition of licensure under Health and Safety Code section 1596.95 (g).